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TO:

COMPANY:

USPTO Group Art Unit 3761

FAX NUMBER:

703-872-9306

PHONE NUMBER:

RE:

Second Preliminary Amendment

FROM:

Gregory L. Bradley

DATE:

4/7/2004

TOTAL NO. OF PAGES INCLUDING COVER:

13

SENDER'S REFERENCE NUMBER:

VI/00-013

YOUR REFERENCE NUMBER:

Serial Number 09/982,518 filed
10/18/2001

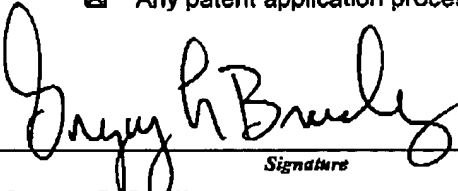
☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Please see attached Second Preliminary Amendment

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One Medrad Drive
Indianola, PA 15051-0780
United States of America

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. VI/00-013	
Applicant(s): TROMBLEY, III et al.					
Serial No. 09/982,518	Filing Date 10/18/2001	Examiner Not Yet Assigned		Group Art Unit 3761	
Invention: POWERED INJECTOR SYSTEMS AND INJECTOR CONTROL					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	46 -	30 =	16 x	\$18.00	\$288.00
INDEP. CLAIMS	6 -	4 =	2 x	\$86.00	\$172.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$460.00
 <input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 13-2530 in the amount of \$460.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-2530 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: April 7, 2004		
Gregory L. Bradley Medrad, Inc. One Medrad Drive Indianola, PA 15051			<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Signature of Person Mailing Correspondence</div> <div style="border: 1px solid black; padding: 5px;">Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					

P11LARGE/REV08